24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
ESAFund	
	C C00489856
Check if 24-hour report 48-hour report New report Amends report filed	d on M=M / D=D / Y=Y=Y=Y
Full Name of Payee	Date of Public Distribution/Dissemination
RedPrint Strategy	07 19 2016
Mailing Address P. O. Box 710993	Amount
City State Zip Code	22446.00
Herndon VA 20171	Transaction ID : SE.6613 Date of Disbursement or Obligation
Purpose of Expenditure direct mail services Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 01
Timothy A. Huelskamp Oppose	President Senate State: KS
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: X Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	
Mailing Address	Amount
City State Zip Code	
Only State Zip Gode	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Calcinati Total To Bato	oursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	22446.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	22446.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
Nancy H. Watkins	-M / D - D / Y - Y - Y
Signature [Electronically Filed] Date	07 20 2016